Region III and IV Partnership Meeting Minutes

Caldwell DHW East and West Conference Rooms

Date: Wednesday, October 31, 2007 Time: 1:30 p.m. – 3:30 p.m. Location: 3402 Franklin Rd., Caldwell, Idaho, 83605 Moderator: Jada Yancey

Information: Updates and Reports from Providers, Medicaid, and ICDE

Discussion: See Information and Discussion Minutes

Task Assignments: See Task Assignment(s).

Team Members: 38 in attendance- Jennifer Maenaka, Cindy Zumr, Jeanne Weber, Deb Parsons, Marie Graham, Lori Ferguson, Jean Christensen, Carolyn Burt- Patterson, Patty Breshears, Elaine Ellison, Art Evans, Jill Fredrickson, Eric Brown, Mary Jane Fulp, Monica Morgan, Traci Brown, John Huth, Katy Tipton, Barbi Burrington, Evangeline Beechler, Gretchen Kruger, Michelle Mitton, Karen Grabow, Beatrice O'Neill, Randy Peterson, Wendy Sieger, Sara Lloyd, Debbie Pedersen, Shelly Brubaker, Clint Harrington, Michael Wilson, Jean Fairbrother, Merie White, Jada Yancey, Sandy Scheffert, Chris Johnson, Rebecca Lemmons, Rachel Chick

Agenda Item	Information and Discussion	Decision(s)	Task Assignment(s)	Due
Introductions and announcements	 Staff changes within RMS were shared- Jean Christensen is now the Program Manager in Region 4. Jean Drennen has moved to CFH in Region 4 with Pam Kaufman. A letter was passed out with contact numbers- Jean Christensen's had a typo- it should be 334-0944. Elaine Ellison shared information on the Resource Library that is currently available through RMS- call Jada Yancey (334-0716) for checking out materials. See attachment to these minutes for a list of resource descriptions. Those checking out materials can have 1 item for up to 5 days and must return it on time and undamaged or forfeit checking out materials in the future. Individuals approved for DD services/CFH providers/agency staff may check out materials. The person checking out the materials must come to RMS to pick up/drop off the resource item- they will not/should not be mailed. Guidelines for the transition process for 18 year olds were passed out with a minor change included. The process can now begin 6-9 months prior to the participant's 18th birthday. See attachment. One item that was left off the announcements was the contact information for the new EDS rep in the Region 4 office- it is Angela Applegate at 334-0842. 			
Healthy Connections	 Paula Faulkner introduced Rainy Natal as the new HC representative in Region 4. You can reach both at 334-4676. Region 3 reps continue to be Sara Hopwood and Joy Longstreet Paula had several handouts, all of which can be found online Effective September 1st, 2007, Family Practice Medical Center got a new federal tax id number, thus they needed to be given a new HC referral number. You can call 367-6030 and ask for Judy or call HC for referral forms as those services needing a referral from 			

	FPMC will need to be updated. Participants will need to go in if they have not been seen in over a year or were auto assigned and never seen, or if they have changed doctors. Call HC if FPMC has not responded in 1-2 weeks. HC is willing and able to do agency trainings as needed.		
Survey and Certification	 Becky Fadness shared information on the move of DDA and RH certifications. They are under Survey and Certification (which is a different program under Licensing and Certification who also manages ICFMR/RALFS/CFH). There are 2 hubs- Region 3/4 and Region 5/6/7. Both hubs review Regions 1/2. This created a centrally located state certification team while striving for consistency within a transparent process. The self assessment process lets agencies know what S&C will be looking for so agencies can remediate issues before the survey. All other surveys (aside from DDA/RH) remain with Regional QA to do best practice, care management, outcomes DDA certificates will now go to center locations, whereas they were certified by region previously The S&C team is working on these current issues: Establishing procedures and the self assessment process Developing the external website which will include training modules (12 by January), information/updates, self assessment forms, provider lists, lists of surveys and complaints, communications, Q&A board, survey trends, contact information, an avenue for family/advocates to file complaints (via a link-these complaints will be filtered through central office to identify regional trends, programs, etc.) and it will be a 1-stop site S&C is open to suggestions relevant to DDA/RH Questions from attendees: Question 1: I saw the old RH assessment. Will we get any training on the assessment forms? The goal is to run the current forms for 6 months, then bring in providers to clarify (clear up "intent" questions). All forms are being revised. Providers can contact S&C anytime with feedback. Question 2: Since the website will post results of plans of correction- will complaints also be posted? It will lo		

	Self assessment clarification: S&C sits down with the agency staff to walk through policies and procedures, staff files, participant files, etc. This can take up to 6 hours. It is more of a presentation style for the agency to show what they have in place. Contact information: Becky Fadness 364-1906		
Medicare-Medicaid Coordinated Care Plan	Sheila Pugatch handed out a copy of the Medic/Aide letter dated March 2007 describing the Medicare-Medicaid Coordinated Plan and contact information for Blue Cross and United Healthcare.		
	 Several provider agencies expressed their frustration with getting paid for services rendered. For those who have not been paid, work through Sheila who will then get in touch with Blue Cross/United. If you have previously been working with Elizabeth Perkins and have not heard a response, call Sheila. Coming January 1st, 2008, participants who are currently enrolled (about 20 in number who have DD diagnoses) will receive a letter from the Department and Blue Cross/United that will allow them to disenroll in order to keep Service Coordination services. If they choose to remain enrolled, these participants will not be able to access Service Coordination services. For providers who have not been paid, they will not be able to backbill for the participant if they disenroll. Sheila can help with this issue. What this means is that as of January 1st, 2008, SC providers can go back to billing through Medicaid for services rendered and there is no need to do an addendum. Jean Christensen will be in contact with Sheila to clarify the process and other logistical questions. Contact information: Sheila Pugatch 364-1817 		
Adjournment.	Meeting adjourned. Thank you to all who attended and participated!	Next meeting to be scheduled in 2008. Calendar announcements will be sent prior.	